Fill in this information to identify your case:		
United States Bankruptcy Court for the:]
MIDDLE DISTRICT OF FLORIDA		
Case number (if known)	Chapter you are filing under: Chapter 7	
	□ ^{C hapter 11} □ ^{C hapter 12}	
	□ C hapter 13	☐ Check if this ar amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a $joint\ case$ e—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses $Debtor\ 1$ and $Debtor\ 2$ to distinguish between them. In joint cases, one of the spouses must report information as $Debtor\ 1$ and the other as $Debtor\ 2$. The same person must be $Debtor\ 1$ in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Keith First name K. Middle name	Teresa First name E. Middle name
	Bring your picture identification to your meeting with the trustee.	Skipper Last name and Suffix (Sr., Jr., II, III)	Skipper Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Keith Kemberly Skipper Kieth Kimberly Skipper	Teresa Elizabeth Skipper
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5553	xxx-xx-5273

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Debtor 1
Debtor 2
Teresa E. Skipper

Case number (ff known)

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Debtor 1 Debtor 2 Teresa E. Skipper Case number (fknown)						
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
 Any business nam Employer Identific Numbers (EIN) yoused in the last 8 your 	cation ou have I have not used any business name or EINs.	■ I have not used any business name or EINs.				
Include trade names doing business a	• •	Business name(s)				
	EINS	EINS				
5. Where you live		If Debtor 2 lives at a different address:				
	803 Gordonia Ct. <u>Deland, FL 32724</u> Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code				
	Volusia County	County				
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code				
6. Why you are choo district to file for bankruptcy		Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)				

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D e b t o D e b t o	Keitti K. Skippei				Case number _(ff known)	
Part 2	Tell the Court About Yo	ur Bankruptcy Case				
	The chapter of the Bankruptcy Code you are choosing to file under		brief description of each, see in 2010)). A Iso, go to the to		y 11 U.S.C. § 342(b) for Individuals Filing for the appropriate box.	
I will pay the entire fee when I file my petition. Please check with the clerk, soffice in your local conabout how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cash order. If your attorney is submitting your payment on your behalf, your attorney may pay with a creat a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for It is not required to, waive your fee, and may request this option only if you are filing for Chapter 7. By is not required to, waive your fee, and may do so only if your income is less than 150% of the office applies to your family size and you are unable to pay the fee in installments). If you choose this option to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file it with your petition.					e yourself, you may pay with cash, cashier,s check, ehalf, your attorney may pay with a credit card or chon, sign and attach the <i>Application for Individuals to F</i> nonly if you are filing for Chapter 7. By law, a judge ur income is less than 150% of the official poverty line in installments). If you choose this option, you mu	or money heck with Pay The e may, but ne that
	Have you filed for bankruptcy within the last 8 years?	■ No. □ Y es. District District District		W hen W hen W hen	Case number Case number Case number	
:	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	No Yes. Debtor District Debtor District		W hen W hen	Relationship to you Case number, if known Relationship to you Case number, if known	
	Do you rent your residence?	■ No. Go to I □ Yes. Has yo □	ur landlord obtained an evic No. Go to line 12.	ement About an Ev	you? viction Judgment Against You(Form 101A) and file	it as part

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Debtor 1 Debtor 2			Case number _(if known)				
	_						
Part 3:	Report About Any Busin	esses You	Own as a Sole Proprietor				
an	e you a sole proprietor of y full- or part-time usiness?	■ No. Go to Part 4.					
		☐ Y es.	Name and location of business				
bu: ind sep co:	sole proprietorship is a siness you operate as an dividual, and is not a parate legal entity such as a rporation, partnership, or C.	_	Name of business, if any				
lf y sol sep	you have more than one le proprietorship, use a parate sheet and attach it to s petition.		Number, Street, City, State & ZIP Code				
un	Check the appropriate box to describe your business:						
			Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))				
			Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A))				
			Commodity Broker (as defined in 11 U.S.C. § 101(6))				
			□ None of the above				
Ch Ba yo de	e you filing under napter 11 of the nkruptcy Code and are u a small business ebtor?		If filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. It is that you are a small business debtor so that it can set appropriate deadlines. It is statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. It is not filling under Chapter 11.				
bu	r a definition of <i>small</i> usiness debtor, see 11 S.C. § 101(51D).	□ ^{N o .}	lam filing under Chapter 11, but lam NOT a small business debtor according to the definition in the Bankruptcy Code.				
		□ Yes.	lam filing under Chapter 11 and lam a small business debtor according to the definition in the Bankruptcy Code.				
Part 4:	Report if You Own or Ha	ave Any Ha	azardous Property or Any Property That Needs Immediate Attention				
pro all	o you own or have any operty that poses or is leged to pose a threat of	No.	W hat is the hazard?				
ha sa pro	minent and identifiable szard to public health or fety? Or do you own any operty that needs mediate attention?		If immediate attention is needed, why is it needed?				
Fo ov or fe	or example, do you wn perishable goods, livestock that must be d, or a building that eeds urgent repairs?		W here is the property? Number, Street, City, State & Zip Code				

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e b to e b to	KCILLI IX. JKIPPCI				Case number _(If known)
art 5	Explain Your Efforts to	Rece	eive a Briefing About Credit Counseling		
		Abo	out Debtor 1:	Abo	out Debtor 2 (Spouse Only in a Joint Case):
-	Tell the court whether you have received a priefing about credit counseling. The law requires that you eceive a briefing about credit counseling before you file for pankruptcy. You must		u must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion. A ttach a copy of the certificate and the payment plan, if any, that you developed with the agency.	You	I must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion. A ttach a copy of the certificate and the payment plan, if any, that you developed with the agency.
1	ruthfully check one of the ollowing choices. If you annot do so, you are not eligible to file. f you file anyway, the court an dismiss your case, you will lose whatever filing fee you paid, and your creditors an begin collection activities		I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion. Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.		I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion. Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.
ć	gain.		I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.		I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.
			To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.		To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.
			Y our case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. A ny extension of the 30-day deadline is granted only for		Y our case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.
			I am not required to receive a briefing about credit counseling because of:		Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit counseling because of:
			Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.		Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
			☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.		☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
			Active duty. I am currently on active military duty in a military combat zone.		Active duty. I am currently on active military duty in a military combat zone.
			If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.		If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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D e b t				Case number	(if known)			
Part	6: Answer These Question	ns for Rep	orting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			□ No. Go to line 16c.					
			Yes. Go to line 17.					
		16c.	State the type of debts you owe	e that are not consumer debts or business debts				
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7	. Go to line 18.				
	Do you estimate that after any exempt property is	Yes.		o you estimate that after any exempt property is e distribute to unsecured creditors?	excluded and administrative expenses are paid			
	excluded and		■ No					
	administrative expenses are paid that funds will be available for distribution to unsecured creditors?		Yes					
18.	How many Creditors do you estimate that you owe?	1 - 4 9 5 0 - 9 9 1 0 0 - 1 2 0 0 - 9	9 9	1,000-5,000 5001-10,000 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000			
19.	How much do you estimate your assets to be worth?	\$100	50,000 01 - \$100,000 ,001 - \$500,000 ,001 - \$1 million	\$1,000,001 - \$10 million \$10,000,001 - \$50 million \$50,000,001 - \$50 million \$50,000,001 - \$100 million \$100,000,001 - \$500 million	\$500,000,001 - \$1 billion \$1,000,000,001 - \$10 billion \$10,000,000,001 - \$50 billion More than \$50 billion			
20.	How much do you estimate your liabilities to be?	\$100	50,000 001 - \$100,000 ,001 - \$500,000 ,001 - \$1 million	\$1,000,001 - \$10 million \$10,000,001 - \$50 million \$50,000,001 - \$50 million \$50,000,001 - \$100 million \$100,000,001 - \$500 million	\$500,000,001 - \$1 billion \$1,000,000,001 - \$10 billion \$10,000,000,001 - \$50 billion More than \$50 billion			
Part	7: Sign Below							
For	you	I have ex	amined this petition, and I declar	e under penalty of perjury that the information p	rovided is true and correct.			
,				am aware that I may proceed, if eligible, under C ler each chapter, and I choose to proceed under C				
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request	relief in accordance with the chap	pter of title 11, United States Code, specified in t	his petition.			
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Keith K. Skipper /s/ Teresa E. Skipper Keith K. Skipper						

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Debtor 1 Debtor 2	Keith K. Skipper Teresa E. Skipper				mber _(ffknown)
		Signature of Debtor 1		Signature of De	obtor 2
		Executed on February 28 MM / DD / YY	, <u>2019</u> Y Y	Executed on	February 28, 2019 MM / DD / YYYY

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Debtor 1 Debtor 2 Keith K. Skipper Teresa E. Skipper		Case	number _(if known)
For your attorney, if you are represented by one If you are not represented by an	I, the attorney for the debtor(s) named in this petition, declare the Chapter 7, 11, 12, or 13 of title 11, United States Code, and havis eligible. I also certify that I have delivered to the debtor(s) th 707(b)(4)(D) applies, certify that I have no knowledge after an incorrect.	e explained the re e notice required	lief available under each chapter for w hich the person by 11 U.S.C. § 342(b) and, in a case in w hich §
attorney, you do not need to file this page.	<u>/s/ Sheryl S Zust</u> Signature of Attorney for Debtor	D a te	February 28, 2019 MM / DD / YYYY
	Sheryl S Zust 0934259 Printed name Sheryl S Zust PA Firm name 4649 Clyde Morris Blvd. Suite 610 Port Orange, FL 32129 Number, Street, City, State & ZIP Code Contact phone (386) 258 3900 0934259 FL Bar number & State	E m a il a d d res s	

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	Ouc	0.10 0	K 0121 + 000	D001 1 1100 02	20/10 1 age 10 0	00	
Fill in	n this information to identil	fy your case:					
Debt	or 1 Keith K. S	Skipper	Middle Name	LactNama			
Debt	or ?	. Skipper	IVI IU U IE IN A III E	Last Name			
(S pou	se if, filing) First Name	· • · · · · · · · · · · · · · · · · · ·	Middle Name	Last Name			
Unite	ed States Bankruptcy Court f	or the:	MIDDLE DISTRICT OF	FLORIDA			
Case (if kno	number wn)					_	if this is an ed filing
Sun Be as	complete and accurate as p	sets and L	o married people are fil	Certain Statistical I	nformation ly responsible for supplying c edules after you file your orig	12/15 orrect infor	mation. Fill out all
new s	Summaryand check the box			you are ming amended son	edules arter you me your orig	mai roi ms,	you must mi out a
Part 1	Summarize Your Ass	sets					
						Your as Value o	ssets fwhatyou own
1.	Schedule A/B: Property (Classical Copy line 55, Total real	Official Form 1 estate, from Sc	06 A /B) hedule A /B			\$	159,962.00
	1b. Copy line 62, Total pers	onal property,	from Schedule A/B			\$	29,726.98
	1c. Copy line 63, Total of al	II property on S	chedule A/B			\$	189,688.98
Part 2	2: Summarize Your Lia	abilities					
							abilities you owe
2.	Schedule D: Creditors Who 2a. Copy the total you listed	<i>Have Claim</i> s. in Column A,	Secured by Property (0 ff Amount of claim, ^{at} the l	icial Form 106D) bottom of the last page of Par	t ^{1 of} Schedule D	\$	180,644.00
3.	Schedule E/F: Creditors W. 3a. Copy the total claims fr	<i>ho Have Unse</i> c om Part 1 (prio	cured Claims ^{(Official} Fority unsecured claims) fr	rm 106E/F) om line 6e of <i>Schedule E/F…</i>		\$	0.00
				s) from line 6j of <i>Schedule E.</i>		\$	70,233.72
					Your total liabilities	\$	250,877.72
Part 3	3: Summarize Your Inc	come and Expe	enses				
4.						\$	3,332.29
						\$	3,319.12
Part 4	Answer These Quest	ions for Admi	nistrative and Statistica	l Records			
6.	Are you filing for bankrup No. You have nothing			k this box and submit this for	m to the court with your other so	chedules.	
	Y es						

- What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

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Debtor 1
Debtor 2

Keith K. Skipper

Teresa E. Skipper

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

From the Statement of Your Current Monthly Income Copy your total current monthly income from Official Form 122A-1
Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ 3,804.75

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E./F:

	Total claim	
From Part 4 on Scheoule E.F., copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	Case 6.19-0	K-01274-CC	JJ DOC.	I Filed 02/	120/19	Page	12 01 08	
Fill in this inform	nation to identify your case a	and this filing:						
Debtor 1	Keith K. Skipper	Middle Name		Last Nam e				
Debtor 2 (Spouse, if filing)	Teresa E. Skipper	Middle Name		Last Name				
United States Ba	ankruptcy Court for the: M	IIDDLE DISTRIC	T OF FLORID <i>i</i>	A				
Case number -				-		_		□ Check if this is an amended filing
	rm 106A/B							
In each category, sep complete and accura	e A/B: Property parately list and describe items. ate as possible. If two married pe	List an asset only one cople are filing togeth	ner, both are equa	ally responsible for su	upplying cori	ect informat		
•	s form. On the top of any addition Each Residence, Building, Land,				Answer every	question.		
¹ . Do you own or ha	ave any legal or equitable interes	st in any residence, b	uilding, land, or s	similar property?				
□ No. Go to Part	2.							
Yes. Where is	the property?							
1.1	onia Ct	What	tisthe property?			B		
803 Gordo	Tind Ct. Favailable, or other description		Duplex or multi-unit building Condominium or cooperative		Do not deduct secured claims or exemptions. I amount of any secured claims on Schedule D: Who Have Claims Secured by Property		S O N Schedule D: Creditors	
Deland	FL 32724	□ 1-0000 □	Manufactured o	r mobile home		Current val		Current value of the portion you own?
City	State ZIP	Code	Investment prop	perty			59,962.00	\$159,962.00
			·			as fee simpl	e, tenancy by th	ownership interest (such e entireties, or a life
		Who	Debtor 1 only	the property? Check	one	estate), if kr		
Volusia County			Debtor 2 only Debtor 1 and De	ohtor 2 only				
ovanty				the debtors and anothe	Г	☐ Check	if this is commu	unity property
			r information you erty identification	u wish to add about tl n number:	hisitem, such	n as local		
	ar value of the portion you o Part 1. Write that number h				y entries fo	r pages you	have	\$159,962.00
Part 2: Describe	Your Vehicles							

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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	btor 1 btor 2		eith K. Skip eresa E. Sk			Case number <i>(if known</i>)		
	Cars, va ⊒No	ıns, tr	ucks, tractor	s, sport utility vehicle	s, motorcycles			
3.	M o d Y e a i A p p O the	del: r: proxim; er info	Ford Escape 2017 the mileage: rmation:	27,000 D2HUC84797	Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secure amount of any secure who Have Claims Current value of the entire property?	red claims <i>Secured by</i> he	or exemptions. Put the On Schedule D: Creditors Property Current value of the portion you own? \$17,325.00
3	M o d Y e a i A p p O the	del: r: proxima er info	Kia Optima 2014 the mileage: mation:	41,000 A72EG288437	Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secul amount of any secul Who Have Claims S Current value of the entire property?	red claims <i>Secured by</i> he	or exemptions. Put the On Schedule D: Creditors Property Current value of the portion you own? \$9,250.00
	■ No □ Yes				ther recreational vehicles, other vehicles, and ac aft, fishing vessels, snow mobiles, motorcycle access accessed to the control of the contr			
	attache	ed for	Part 2. Writ	e that number here	======================================	anines for pages you have		\$26,575.00
Do	you ow	n or l	nave any leg		in any of the following items?		po D o	rrent value of the rtion you own? not deduct secured ims or exemptions.
	louseho Example □ No ■ Yes.			nishings es, furniture, linens, chi	na, kitchenware			
					Dining Room Set, Bedroom Set, Washer, rowave, Small Appliances, Misc. Kitchen		_	\$875.00
	Electron Example □ No ■ Yes.	/es: ^{T e}	hones, came	radios; audio, video, st ras, media players, gam	dereo, and digital equipment; computers, printers, s es	canners; music collections; e	lectronic (levices including cell
				Computer, Cell P	hone, VCR/DVD Player.		_	\$225.00

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			Skipper Skipper	Case number _{(ff}	known)	
	Collectibles of Examples: An	itiques	and figurines; paintings, prints, or other artwork; b ns, memorabilia, collectibles	ooks, pictures, or other art objects; stamp, coin, o	or baseball card	l collections; other
	Yes. Desc					
	Examples: ^{S p} ir	r sport orts, ph ostrume	s and hobbies otographic, exercise, and other hobby equipment; nts	bicycles, pool tables, golf clubs, skis; canoes and	i kayaks; carpe	entry tools; musical
	■ No □ Yes. Desc	ribe				
	Firearms Examples: P ■ No ■ Yes. Desc		ifles, shotguns, ammunition, and related equipmen	nt		
	Clothes Examples: E No Yes. Desc		y clothes, furs, leather coats, designer wear, shoes	, accessories		
	Tes. Desc	IIDe			I	4405.00
_			Clothes			\$105.00
			Clothes.			\$115.00
	Jewelry Examples: E □ No ■ Yes. Desc		y jewelry, costume jewelry, engagement rings, we	dding rings, heirloom jewelry, watches, gems, go	old, silver	
			Wedding Bands, Misc. Jewelry & 0	Costume Jewelry.		\$150.00
	Non-farm an Examples: D No Yes. Desci	ogs, ca	ts, birds, horses			
14.	Any other pe		and household items you did not already list, in	ncluding any health aids you did not list		
	■ No □ Yes. Give	specifi	: information			
15.			lue of all of your entries from Part 3, including or here		art 3.	\$1,470.00
			inancial Assets			
Do	you own or h	nave ar	y legal or equitable interest in any of the follow	ring?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No ´		ou have in your wallet, in your home, in a safe de		n	
				Cash		\$50.00
						

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	(. Skipper E. Skipper	Case number <i>(if known</i>)	
17. Deposits of money		is; certificates of deposit; shares in credit unions, brokerage houses, and o ution, list each.	ther similar institutions. If you
□ N o ■ Y e s		Institution name:	
	^{17.1.} Checking	Launch Federal Credit Union	\$115.01
	^{17.2.} Savings	Launch Federal Credit Union	\$5.00
18. Bonds, mutual fur Examples: Bond f	nds, or publicly traded stocks unds, investment accounts with broke	rage firms, money market accounts	
■ N 0	Institution or issuer	name:	
19. Non-publicly trad ■ No	ed stock and interests in incorporate	ed and unincorporated businesses, including an interest in an LLC, p	partnership, and joint venture
-	fic information about them Name of entity:	% of ownership:	
Negotiable instru Non-negotiable in ■ N o	corporate bonds and other negotiab ments include personal checks, cashier nstruments are those you cannot transfo ic information about them Issuer name:	le and non-negotiable instruments s'checks, promissory notes, and money orders. er to someone by signing or delivering them.	
21. Retirement or per Examples: Interes No Yes. List each ac	ts in IRA, ERISA, Keogh, 401(k), 403	(b), thrift savings accounts, or other pension or profit-sharing plans Institution name:	
	,,		
	Retirement Plan	Florida Retirement Systems	Unknown
	Pension	AHRP- AdventHealth	\$111.97
<i>Example</i> s: ^{Agreer} ■ No	ments with landlords, prepaid rent, put	you may continue service or use from a company lic utilities (electric, gas, water), telecommunications companies, or othe	rs
Y es		Institution name or individual:	
■ No	action a periodic payment of money to such a second section.	o you, either for life or for a number of years)	
Y es	·		
26 U.S.C. §§ 530(b		fied ABLE program, or under a qualified state tuition program.	
☐ Y es	Institution name and description.	Separately file the records of any interests.11 U.S.C. § 521(c):	
N o	or future interests in property (other	than anything listed in line 1), and rights or powers exercisable for	your benefit

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	ebtor 1 ebtor 2		Skipper E. Skipper			Case number <i>(if known</i>)	
26.	Patents, c Example ■ No	opyrights s: Internet	s, trademari domain nam	ks, trade secrets, and of nes, websites, proceeds f	ther intellectual property from royalties and licensing agre	e e m e n ts	
	☐ Yes. G	ive specif	ic informatio	on about them			
27.	Licenses, Example ■ No	franchise _{S:} Buildin	es, and other g permits, ex	general intangibles clusive licenses, cooper	rative association holdings, liquo	or licenses, professional licenses	
	☐ Yes. G	ive specif	ic informatio	n about them			
M	oney or pr	operty ov	ved to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refur ■ No		-	n shout them, including	whether you already filed the re	sturns and the tax years	
	☐ 1 €3. G1	ve speciii	L 1111011111 a LIU	ii about them, including	whether you already then the re	cuills allu the tax years	
29.	■ No	s: Past du			port, child support, maintenance	, divorce settlement, property settlement	
	☐ Y es. Gi	ve specifi	c informatio	n			
30.	Example ■ No	s: Unpaid you m	ade to some	õility insurance payment one else	ts, disability benefits, sick pay, v	racation pay, workers' compensation, So	cial Security benefits; unpaid loans
	_	•	ic informatio	ın			
	Interests in Example □ N 0	in insurar s: Health,	nce policies disability , or	r life insurance; health sa	avings account (HSA); credit, h	omeowner's, or renter's insurance	
	Yes. Na	me the in	surance com	pany of each policy and Company name:	l list its value.	Beneficiary:	Surrender or refund value:
				State Farm Life			\$1,400.00
32.	■ No		perty that in ficiary of a l		ne who has died eds from a life insurance policy	, or are currently entitled to receive prope	rty because someone has died.
33.	Claims ag Example No	jainst thir S: Accider	d parties, w nts, employm	whether or not you have ent disputes, insurance	efiled a lawsuit or made a der claims, or rights to sue	nand for payment	
	☐ Yes. D	escribe ea	ch claim				
34.	■ No	J	•	-	ature, including counterclaims	s of the debtor and rights to set off claim	ns
	☐ Yes. D	escribe ea	ch claim				
35.	Any finan	icial asset	s you did no	ot already list			
		ive specif	ic informatio	n			
36					rt 4, including any entries for p	pages you have attached for Part 4.	\$1,681.98

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Debtor Debtor			Case number <i>(if known</i>)	
Part 5:	Describe Any Business-Related Property You Own or Have an Interest In	. List any real estate in Part	t 1.	
,	ou own or have any legal or equitable interest in any business-related prope	erty?		
	o. Go to Part 6.			
ЦΥ	es. Go to line 38.			
Part 6	Describe Any Farm- and Commercial Fishing-Related Property You Own If you own or have an interest in farmland, list it in Part 1.	or Have an Interest In.		
	you own or have any legal or equitable interest in any farm- or cor	mmercial fishing-related	property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You Did	d Not List Above		
	you have other property of any kind you did not already list? camples: Season lickets, country club membership lo des. Give specific information			
54. A	dd the dollar value of all of your entries from Part 7. Write that no	umberhere		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. P	art 1: Total real estate, line 2			\$159,962.00
	art 2: Total vehicles, line 5	\$26,575.00		
	art 3: Total personal and household items, line 15	\$1,470.00		
	art 4: Total financial assets, line 36	\$1,681.98		
	art 5: Total business-related property, line 45	\$0.00		
60. P	art 6: Total farm- and fishing-related property, line 52	\$0.00		
61. P	art 7: Total other property not listed, line 54	\$0.00		
62. T	otal personal property. Add lines 56 through 61	\$29,726.98	Copy personal property tota	s29,726.98
63. T	otal of all property on Schedule A/B. Add line 55 + line 62			\$189,688.98

Fil	II in this inform	nation to identify your case:	:			
	btor 1	Keith K. Skipper				
D e	btor 2	First Name	Middle Name	L	ast Name	
(S p	ouse if, filing)	Teresa E. Skipper First Name	Middle Name	L	ast Name	
U n	nite d S ta te s B	ankruptcy Court for the:	MIDDLE DISTRICT OF FLO	A DI A C		
C a	se number					
(if k	(nown)					☐ Check if this is an amended filing
01	fficial Fo	rm 106C				
Sc	chedule	C: The Property	y You Claim as E	xem	pt	4/16
th e	property you	·	(Official Form 106A/B) a		source, list the property that you cl	r supplying correct information. Using aim as exempt. If more space is dditional pages, write your name and
	e number (if k		Part 2: Additio	onal Pag	pe	uuttonai pages, witte youi name anu
am Sor Ho pro	ount as exemp me exemptions wever, if you o operty is detern	t. Alternatively, you may cla - such as those for health a claim an exemption of 100%	aim the full fair market value aids, rights to receive certain b of fair market value under a at, your exemption would be li	of the poenefits law that	ne exemption you claim. One way of opproperty being exempted up to the are, and tax-exempt retirement funds—lat limits the exemption to a particular o the applicable statutory amount.	mount of any applicable statutory limit. may be unlimited in dollar amount.
		exemptions are you claimin	ng? Check one only, even if you	ir smi is	a is filing with you	
			nonbankruptcy exemptions.			
	□ You are o	claiming federal exemption	s. 11 U.S.C.§ 522(b)(2)			
2.	For any prop	perty you list on <i>Schedule A</i> .	∠B≀that you claim as exempt, f	fill in th	e information below.	
	Brief descripti	on of the property and line on g	Schedule Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	A/B that hats	πισ μι ομα τγ	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	803 Gordon Volusia Co	nia Ct. Deland, FL 32724	\$159,962.00		\$159,962.00	Fla. Const. art. X, § 4(a)(1); Fla. Stat. Ann. §§ 222.01 & 222.02
	ling from	chedule A/B [:] 1.1			100% of fair market value, up to any applicable statutory limit	Stat. Allii. 33 222.01 & 222.02
		m Set, Dining Room Set,	\$875.00		\$875.00	Fla. Const. art. X, § 4(a)(2)
	Refrigerato	Set, Washer, Dryer, or, Microwave, Small			100% of fair market value, up to	
	Pictures, T	s, Misc. Kitchenware, Boo ools. <i>chedule A/B</i> 6.1	oks,		any applicable statutory limit	
			Marra n			FI- 0-11-1 -11 V C 4/-\/0\
	ling from	Cell Phone, VCR/DVD P chedule A/B [:] 7.1	rlayer. \$225.00	┈	\$225.00	Fla. Const. art. X, § 4(a)(2)
					100% of fair market value, up to any applicable statutory limit	
	Clothes Line from		\$105.00		\$105.00	Fla. Const. art. X, § 4(a)(2)
	Sc. 30	chedule A/B [:] 11.1			100% of fair market value, up to any applicable statutory limit	
					and abbuse of a rate of a mile	

Official Form 106C

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Debtor 1 Debtor 2	Keith K. Skipper Teresa E. Skipper		Case number (if known)	
	f description of the property and line on <i>Scheolule</i> that lists this property	Current value of the portion you own Copy the value from Schedule A/B	ount of the exemption you claim ock only one box for each exemption.	Specific laws that allow exemption
	thes. from Schedule A/B 11.2	\$115.00	\$115.00 100% of fair market value, up to any applicable statutory limit	Fla. Const. art. X, § 4(a)(2)
Cos	dding Bands, Misc. Jewelry & stume Jewelry. from Schedule A/B 12.1	\$150.00	\$150.00 100% of fair market value, up to any applicable statutory limit	Fla. Const. art. X, § 4(a)(2)
Cas Line	sh from Schedule A/B 16.1	\$50.00	\$50.00 100% of fair market value, up to any applicable statutory limit	Fla. Const. art. X, § 4(a)(2)
	ecking: Launch Federal Credit Union from Schedule A/B 17.1	\$115.01	\$115.01 100% of fair market value, up to any applicable statutory limit	Fla. Const. art. X, § 4(a)(2)
	vings: Launch Federal Credit Union from Schedule A/B 17.2	\$5.00	\$5.00 100% of fair market value, up to any applicable statutory limit	Fla. Const. art. X, § 4(a)(2)
Sys	irement Plan: Florida Retirement stems from Schedule A/B 21.1	Unknown	100% 100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. § 222.21(2)
	nsion: AHRP- AdventHealth from Schedule A/B 21.2	\$111.97	\$111.97 100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. § 222.21(2)
	te Farm Life from Schedule A/B 31.1	\$1,400.00	\$1,400.00 100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. § 222.14
	e you claiming a homestead exemption of more bject to a djustment on 4/01/19 and every 3 No Yes. Did you acquire the property covered No Yes	years after that for ca	,	

				<u></u>	
Fill in this informa	tion to identify your ca	ise:			
Debtor 1	Voith V Chinner				
	Keith K. Skipper	Middle Name Last Name			
Debtor 2	Teresa E. Skippe	r			
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Bar	nkruptcy Court for the:	MIDDLE DISTRICT OF FLORIDA			
Case number					
(if known)				☐ Check	if this is an
				a m e n d	e d filing
Official Form	104D				
		III a collaboration Comments III a December			
Schedule D:	Creditors W ho	Have Claims Secured by Property	1		12/15
		married people are filing together, both are equally respons			e is needed, copy the
3 -	out, number the entries, a ave claims secured by your	and attach it to this form. On the top of any additional page	s, write your name and ca	se number (ir known).	
		form to the court with your other schedules. You have r	nothing else to report on	this form.	
	all of the information be	•	.og clos to report on		
		10 W .			
	Secured Claims		0.11	0.1 B	2.12
2. List all secured cla	nims. If a creditor has more to the creditor has a particular c	than one secured claim, list the creditor separately for each laim, list the other creditors in Part 2. As much as possible, list	Column A Amount of claim	Colum B Value of collateral	Column C Unsecured
	ical order according to the c		Do not deduct the	that supports this	portion
2 1 Lincoln Au	tomotivo		value of collateral.	claim	lf any
Financial S		Describe the property that secures the claim:	\$21,827.00	\$17,325.00	\$4,502.00
Creditor's Name		2017 Ford Escape 27,000 miles			
Attn: Bankı	ruptcy	VIN No.: 1FMCU0JD2HUC84797			
Po Box 542		As of the date you file, the claim is: Check all that apply.			
Omaha, NI		Contingent			
Number, Street, C	ity, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt	? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		■ An agreement you made (such as mortgage or secured car	r		
Debtor 2 only		loan)			
■ Debtor 1 and Deb	tor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the		☐ Judgment lien from a lawsuit			
☐ Check if this claid	m relates to a community	Other (including a right to offset)			
ucot					
	Opened				
Date debt was incurr	01/17 Last ed Active 12/18	Last 4 digits of account number 5841			
	ACTIVE 12/10				
Mr. Coope	r	Describe the property that secures the claim:	\$144,529.00	\$159,962.00	\$0.00
Creditor's Name	·	803 Gordonia Ct. Deland, FL 32724			70.00
Attn: Bankı	ruptcv	Volusia County			
	ess Waters Blvd	As of the date you file, the claim is: Check all that apply.			
Coppell, T		☐ Contingent			
Number, Street, C	ity, State & Zip Code	Unliquidated			
Who owes the debt	? Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only		An agreement you made (such as mortgage or secured car	r		
Debtor 2 only		loan)			
Debtor 1 and Deb	tor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the	debtors and another	☐ Judgment lien from a law suit			

page 1 ^{of} 2

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Debtor 1 Keith K. Ski			Case	e number (if known)		
Debtor 2 Teresa E. S	Middle Na kipper Middle Na					
Check if this claim relat		Other (including a right to offset)				
Date debt was incurred	Opened 07/16 Last Active 11/18	Last 4 digits of account number	5497			
2.3 Santander Cons	umer USA	Describe the property that secures the claim:		\$14,288.00	\$9,250.00	\$5,038.00
Creditor's Name Attn: Bankruptcy	,	2014 Kia Optima 41,000 miles VIN No.: 5XXGM4A72EG288437				
Attn: Bankruptcy Po Box 961245 Fort Worth, TX 76161 Number, Street, City, State & Zip Code Who owes the debt? Check one.		As of the date you file, the claim is: Check all th Contingent Unliquidated Disputed Nature of lien. Check all that apply.	at apply.			
Debtor 1 only Debtor 2 only		An agreement you made (such as mortgage of loan)	or secured car			
Debtor 1 and Debtor 2 on	ly	☐ Statutory lien (such as tax lien, mechanic's li	en)			
☐ At least one of the debtors☐ Check if this claim relatedebt		☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)				
Date debt was incurred	Opened 04/17 Last Active 11/18	Last 4 digits of account number	1000			
If this is the last page of your write that number here:	our form, add the d	nn A on this page. Write that number here: lollar value totals from all pages.		\$180,644.00 \$180,644.00		
Use this page only if you have you for a debt you owe to so	ve others to be notion	Debt That You Already Listed fied about your bankruptcy for a debt that you creditor in Part 1, and then list the collection a	igency here. Simi	larly, if you have more tha	n one creditor for any o	f the debts that
Name, Number, Stree		s here. If you do not have additional persons to				ge.
Ford Credit PO Box 542000 Omaha, NE 681				in Part 1 did you enter the c	editor:	
Name, Number, Stree Santander PO Box 660633 Dallas, TX 7526		Code		in Part 1 did you enter the c	reditor? <u>2.3</u>	

	Case 6.19-01	K-01274-CCJ D0C	1 Filed (JZ1Z8119	Page 22 01 08	
Fill in this in	formation to identify your case:					
Debtor 1	Keith K. Skipper	Middle Name	Last Name			
Debtor 2 (Spouse if, filing	Teresa E. Skipper	Middle Name	Last Name			
Unite d S ta te	s Bankruptcy Court for the:	MIDDLE DISTRICT OF FLOR	ID A			
Case numb	er					
(if known)						heck if this is an mended filing
Official F	orm 106E/F					
Schedule	E/F: Creditors Who H	Have Unsecured Clai	ms			12/15
contracts or un and Unexpired Property. If mo information to	and accurate as possible. Use Part 1 for expired leases that could result in a clause (Official Form 106G). Do not in ore space is needed, copy the Part you report in a Part, do not file that Part. ist All of Your PRIORITY Unsections.	aim. Also list executory contracts on nclude any creditors with partially need, fill it out, number the entries On the top of any additional pages,	on Schedule A/B: Po secured claims that in the boxes on the	roperty (Official l at are listed in Sch e left. Attach the C	Form 106A/B) and on Sched redule D: Creditors Who Ha Continuation Page to this pag	ule G: Executory Contracts ve Claims Secured by
1. Do any cr	editors have priority unsecured claim	s against you?				
No. G	o to Part 2.					
Yes.						
Part 2:	ist All of Your NONPRIORITY U	Jnsecured Claims				
3. Do any cr	editors have nonpriority unsecured cl	aims against you?				
□ No. Y	ou have nothing to report in this part. Sul	bmit this form to the court with your o	other schedules.			
Yes.						
4. List all of creditor se	your nonpriority unsecured claims in parately for each claim. For each claim l er creditors in Part 3.1f you have more th	the alphabetical order of the credit isted, identify what type of claim it is	tor who holds each . Do not list claims : s fill out the Continu	claim. If a credito already included in uation Page of Part	r has more than one nonpriori 1 Part 1. If more than one credi 1 2	y unsecured claim, list the tor holds a particular claim,
1130 010	ior ordanors in rain o.i. you have more in	an anso nonpriority unscourse stains	Jim out the continu	aution rage or rain	. 2.	Total claim
4.1 Bar	clays Bank Delaware	L ast 4 digits of accou	unt number	1590	_	\$6,569.00
Po	n: Correspondence Box 8801	When was the debt in	ncurred?	Opened 08/0	9 Last Active 02/17	-
<u>Wil</u> Num	mington, DE 19899 ber Street City State Zip Code	As of the date you fil	e, the claim is: Che	ck all that apply		
	o incurred the debt? Check one.	□ Contingent				
_	Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	□ Disputed				
	Debtor 1 and Debtor 2 only	Type of NONPRIOR	RITY unsecured cla	aim:		
_	at least one of the debtors and another	Student loans				
	Check if this claim is for a community e claim subject to offset?	debt	g out of a separation	ı agreement or divo	orce that you did not report	
I		Debts to pension o	or profit-sharing plan	ns, and other simila	ar debts	
☐ Y	'es	Other. Specify	Credit Card			-

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Debtor Debtor	NOILLI IX. OKIPPOI	Case number (if known)				
4.2	Capital One Nonpriority Creditor's Name	L ast 4 digits of account number	9896	\$4,637.00		
	Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 09/94 Last Active 03/17			
	Salt Lake City, UT 84130 Number Street City State Zip Code	As of the date you file, the claim is:	Check all that apply			
	Who incurred the debt? Check one. Debtor 1 only	□ Contingent				
		□ Unliquidated				
	Debtor 2 only	Disputed				
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:			
	At least one of the debtors and another	☐ Student loans				
	Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separ as priority claims	ation agreement or divorce that you did not report			
	N 0	■ Debts to pension or profit-sharing	plans, and other similar debts			
	Yes	Other. Specify Credit Car	d			
4.3	Capital One Nonpriority Creditor's Name	L ast 4 digits of account number	3432	Unknown		
	Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 11/05 Last Active 08/13			
	Salt Lake City, UT 84130 Number Street City State Zip Code	As of the date you file, the claim is:	Check all that apply			
	Who incurred the debt? Check one.	□ Contingent				
	Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	Disputed				
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:			
	☐ At least one of the debtors and another	Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separ as priority claims				
	N 0	Debts to pension or profit-sharing	plans, and other similar debts			
	☐ Y es	Other. Specify Charge Of	f			
4.4	Central FI Educators F Nonpriority Creditor's Name	Last 4 digits of account number	3207	\$20,194.00		
	1200 Weber St Orlando, FL 32803	When was the debt incurred?	Opened 02/07 Last Active 09/18			
	Number Street City State Zip Code	As of the date you file, the claim is:	Check all that apply			
	Who incurred the debt? Check one.	□ Contingent				
	Debtor 1 only	□ Unliquidated				
	Debtor 2 only	□ Disputed				
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:			
	At least one of the debtors and another	Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separ as priority claims	ation agreement or divorce that you did not report			
	■ N o	■ Debts to pension or profit-sharing	plans, and other similar debts			
	Yes	■ Other. Specify Credit Car	d			

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Debtor Debtor	Keitii K. Skippei		Case number (if known)	
4.5	Central Florida Regional Hospi Nonpriority Creditor's Name	Last 4 digits of account number	8384	\$713.00
	c/o Capio Partners Llc Attn: Bankruptcy Po Box 3498	When was the debt incurred?	Opened 06/18 Last Active 7/30/18	
	Sherman, TX 75091 Number Street City State Zip Code	As of the date you file, the claim is:	Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent		
		☐ U nliquidated		
	Debtor 2 only	□ Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	□ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separ as priority claims	ation agreement or divorce that you did not report	
	No	Debts to pension or profit-sharing	plans, and other similar debts	
	Yes	Other. Specify Collection	Attorney	
4.6	Central Florida Regional Hospital	L ast 4 digits of account number	All Accounts	Unknown
	PO Box 1828	When was the debt incurred?		
	Sanford, FL 32772-1828 Number Street City State Zip Code	_		
		As of the date you file, the claim is:	Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	□ Contingent		
	Ξ ΄	■ Unliquidated		
	Debtor 2 only	Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separ as priority claims	ation agreement or divorce that you did not report	
	■ N o	Debts to pension or profit-sharing	plans, and other similar debts	
	Yes	Other. Specify Medical		
4.7	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	7994	\$4,241.00
	Correspondence Dept	When was the debt incurred?	Opened 06/95 Last Active 02/17	
	Po Box 15298			
	Wilmington, DE 19850 Number Street City State Zip Code	As of the date you file, the claim is:	Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	□ Contingent		
		■ U nliquidated		
	Debtor 2 only	Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separ as priority claims	ation agreement or divorce that you did not report	
	■ N o	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Car	d	

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Debtor Debtor	KCILLI IX. OKIPPCI		Case number (if known)	
4.8	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	8144	\$4,159.00
	Correspondence Dept Po Box 15298	When was the debt incurred?	Opened 11/06 Last Active 02/17	
	Wilmington, DE 19850 Number Street City State Zip Code	As of the date you file, the claim is:	Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	□ Contingent		
	Debtor 2 only	□ Unliquidated		
		☐ Disputed		
	■ Debtor 1 and Debtor 2 only At least one of the debtors and another	Type of NONPRIORITY unsecure Student loans	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separ as priority claims	ation agreement or divorce that you did not report	
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Car	d	
4.9	Citibank North America Nonpriority Creditor's Name	Last 4 digits of account number	5864	\$2,027.00
	Citibank Corp/Centralized Bankruptcy Po Box 790034	When was the debt incurred?	Opened 11/05 Last Active 8/02/18	
	St Louis, MO 63179 Number Street City State Zip Code	As of the date you file, the claim is:	Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	□ Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed	ad alaim.	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	a ciaiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ation agreement or divorce that you did not report	
	N o	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Car	d	
4.10	Citibank/Exxon Mobile Nonpriority Creditor's Name	Last 4 digits of account number	7879	Unknown
	Centralized Bankruptcy Po Box 790034	When was the debt incurred?	Opened 6/14/07 Last Active 5/02/18	
	St Louis, MO 63179 Number Street City State Zip Code	As of the date you file, the claim is:	Check all that apply	
	Who incurred the debt? Check one.	□ Contingent		
	Debtor 1 only	□ Unliquidated		
	Debtor 2 only	□ Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	as priority claims	ation agreement or divorce that you did not report	
	■ N o	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Y es	■ Other. Specify Settled Le	ss Than Full Balance	

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Debtor Debtor			Case number (if known)	
4.11	Citibank/Shell Oil Nonpriority Creditor's Name	Last 4 digits of account number	8298	\$1,080.00
	Centralized Bankruptcy Po Box 790034	When was the debt incurred?	Opened 09/12 Last Active 12/18	
	St Louis, MO 63179 Number Street City State Zip Code	As of the date you file, the claim is:	Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent		
	Debtor 2 only	□ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure ☐ Student loans	od claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separ as priority claims	ation agreement or divorce that you did not report	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Car	d	
4.12	Citibank/The Home Depot Nonpriority Creditor's Name	Last 4 digits of account number	4346	\$1,428.00
	Attn: Recovery/Centralized Bankruptcy Po Box 790034	When was the debt incurred?	Opened 05/02 Last Active	
	St Louis, MO 63179 Number Street City State Zip Code	As of the date you file, the claim is:	Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	□ Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed	ad alaim.	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure Student loans	a ciaiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ation agreement or divorce that you did not report	
	N o	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Charge Ac	count	
4.13	Citicards Cbna Nonpriority Creditor's Name	Last 4 digits of account number	5049	\$15,377.00
	Citi Bank	When was the debt incurred?	Opened 08/94 Last Active 01/17	
	Po Box 6077			
	Sioux Falls, SD 57117 Number Street City State Zip Code	As of the date you file, the claim is:	Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	Disputed		
	■ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:	
	☐ At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separ as priority claims	ation agreement or divorce that you did not report	
	■ N o	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Y es	Other. Specify Credit Car	rd	

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Debtor 1 Debtor 2 Keith K. Skipper Teresa E. Skipper			Case number (if known)		
4.14	Discover Financial Nonpriority Creditor's Name	L ast 4 digits of account number	9119	\$6,200.00	
	Po Box 3025 New Albany, OH 43054	When was the debt incurred?	Opened 05/09 Last Active 9/28/18		
	Number Street City State Zip Code	As of the date you file, the claim is:	Check all that apply		
	Who incurred the debt? Check one.	□ Contingent			
	Debtor 1 only	□ Unliquidated			
	Debtor 2 only	Disputed			
	□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	Type of NONPRIORITY unsecure ☐ Student loans	d claim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ation agreement or divorce that you did not report		
	■ No	Debts to pension or profit-sharing	plans, and other similar debts		
	Yes	Other. Specify Credit Car	d		
4.15	Kohls/Capital One Nonpriority Creditor's Name	L ast 4 digits of account number		Unknown	
	Kohls Credit Po Box 3120	When was the debt incurred?	Opened 10/05 Last Active 6/28/17		
	Milwaukee, WI 53201 Number Street City State Zip Code	As of the date you file, the claim is:	Check all that apply		
	Who incurred the debt? Check one.		,		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated ☐ Disputed			
	■ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:		
	☐ At least one of the debtors and another	Student loans	d didini.		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separ as priority claims	ation agreement or divorce that you did not report		
	■ No	Debts to pension or profit-sharing	j plans, and other similar debts		
	Yes	■ Other. Specify Settled Le	ss Than Full Balance		
4.16	Mayo Clinic Nonpriority Creditor's Name	Last 4 digits of account number	All Accounts	Unknown	
	4500 San Pablo Rd. Jacksonville, FL 32224	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim is:	Check all that apply		
	Who incurred the debt? Check one.	□ Contingent			
	Debtor 1 only	□ Unliquidated			
	Debtor 2 only	Disputed			
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:		
	At least one of the debtors and another	☐ Student loans			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	as priority claims	ation agreement or divorce that you did not report		
	■ N o	☐ Debts to pension or profit-sharing	plans, and other similar debts		
	☐ Yes	Other. Specify Medical			

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Debtor Debtor		Case number (if known)	Case number (if known)		
4.17	PayPal Credit	Last 4 digits of account number 5465	\$936.72		
	PO Box 71202	When was the debt incurred?			
	Charlotte, NC 28272-1202 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	□ Unliquidated			
	Debtor 2 only	□ Disputed			
	■ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:			
	At least one of the debtors and another	☐ Student loans			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	N 0	Debts to pension or profit-sharing plans, and other similar debts			
	☐ Y es	Other. Specify Credit Card			
4.18	Syncb/PLCC Nonpriority Creditor's Name	Last 4 digits of account number	Unknown		
	Attn: Bankruptcy Po Box 965060	When was the debt incurred? Opened 06/02 Last Active 06/17			
	Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	□Unliquidated			
	Debtor 2 only	Disputed			
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:			
	At least one of the debtors and another	Student loans			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Charge Off			
4.19	Synchrony Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$402.00		
	Attn: Bankruptcy Dept Po Box 965060	When was the debt incurred? Opened 06/17 Last Active 12/18			
	Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	□Unliquidated			
	Debtor 2 only	Disputed			
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:			
	At least one of the debtors and another	Student loans			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Y es	■ Other. Specify Credit Card			

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Debtor Debtor	KCILII IX. SKIPPCI		Case number (if known)	
4.20	Synchrony Bank Nonpriority Creditor's Name	Last 4 digits of account number	_2558	Unknown
	Attn: Bankruptcy Dept Po Box 965060	When was the debt incurred?	Opened 08/08 Last Active 10/17	-
	Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim is:	Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	□ Contingent		
	Debtor 2 only	□ Unliquidated		
		Disputed		
	■ Debtor 1 and Debtor 2 only At least one of the debtors and another	Type of NONPRIORITY unsecure ☐ Student loans	od claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separas priority claims	ation agreement or divorce that you did not report	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Settled Le	ss Than Full Balance	-
4.21	Synchrony Bank Nonpriority Creditor's Name	Last 4 digits of account number	5412	Unknown
	Attn: Bankruptcy Dept Po Box 965060	When was the debt incurred?	Opened 09/16 Last Active 8/31/17	_
	Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim is:	· Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated ☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	ed claim:	
	☐ At least one of the debtors and another	Student loans	a sam.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separ as priority claims	ation agreement or divorce that you did not report	
	■ N o	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Settled Le	ss Than Full Balance	-
4.22	Synchrony Bank/Amazon Nonpriority Creditor's Name	Last 4 digits of account number	5824	Unknown
	Attn: Bankruptcy Dept Po Box 965060	When was the debt incurred?	Opened 06/11 Last Active 10/11/17	_
	Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim is:	Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	Unliquidated		
	Debtor 2 only	□ Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	ed claim:	
	At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	as priority claims	ation agreement or divorce that you did not report	
	N o	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Y es	Other. Specify Settled Le	ss Than Full Balance	_

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Debtor Debtor	KCILLI K. SKIPPCI		Case number (if known)	
4.23	Synchrony Bank/Chevron Nonpriority Creditor's Name	Last 4 digits of account number	6884	Unknown
	Attn: Bankruptcy Dept Po Box 965060	When was the debt incurred?	Opened 05/88 Last Active 09/16	-
	Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim is	: Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	□ Contingent		
	Debtor 2 only	□ Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure Student loans	ed claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separal objects of a separal	ration agreement or divorce that you did not report	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Settled Le	ss Than Full Balance	-
4.24	Synchrony Bank/Lowes Nonpriority Creditor's Name	Last 4 digits of account number	_6663	Unknown
	Attn: Bankruptcy Dept Po Box 965060	When was the debt incurred?	Opened 10/03 Last Active 09/17	-
	Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim is	Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	ed claim:	
	At least one of the debtors and another	■ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separal as priority claims	ation agreement or divorce that you did not report	
	N 0	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Settled Le	ss Than Full Balance	-
4.25	Visa Dept Store National Bank/Macy's	Last 4 digits of account number	7160	\$2,270.00
	Attn: Bankruptcy	When was the debt incurred?	Opened 11/03 Last Active 02/17	_
	Po Box 8053			
	Mason, OH 45040 Number Street City State Zip Code	As of the date you file, the claim is	Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	□ Unliquidated		
	Debtor 2 only	□ Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	ed claim:	
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separal as priority claims	ation agreement or divorce that you did not report	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Y es	Other. Specify Charge Ac	ccount	_

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Debtor 2 Debtor 2			Case number (if known)					
4.26	W.S. Badcock Corp	Last 4 digits of account number	0037	Unknown				
	Attn: Bankruptcy 200 North Phosphate Blvd	When was the debt incurred?	Opened 09/16 Last Active 07/17					
	Mulberry, FL 33860 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply					
	Who incurred the debt? Check one.	☐ Contingent						
	Debtor 1 only		Unliquidated					
	Debtor 2 only	☐ Disputed	□ Disputed					
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecu	red claim:					
	☐ At least one of the debtors and another	Student loans						
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separate of the Department of the	aration agreement or divorce that you did not report					
	■ N o	Debts to pension or profit-shari	ng plans, and other similar debts					
	☐ Y es	■ Other. Specify Charge A	account					
Part 3:	List Others to Be Notified About a Debt	That You Already Listed						
	s nage only if you have others to be notified about	your hankruntcy for a debt that you alre	eady listed in Parts 1 or 2. For example, if a collection ag	nency is trying to collect				
from y	you for a debt you owe to someone else, list the oric bts that you listed in Parts 1 or 2, list the additiona	ginal creditor in Parts 1 or 2, then list the	collection agency here. Similarly, if you have more than onal persons to be notified for any debts in Parts 1 or 2,	one creditor for any of				
Name an	d Address	On which entry in Part 1 or Part 2 did you	list the original creditor?					
	u, Palma, Lavin & Solis, PLLC	Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims					
1000 N Suite 4	NW 57th Court		Part 2: Creditors with Nonpriority Unsecured Claims					
	, FL 33126							
		Last 4 digits of account number	ast 4 digits of account number					
Name an	d Address	On which entry in Part 1 or Part 2 did you	list the original creditor?					
	u, Palma, Lavin & Solis, PLLC	Line 4.1 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims					
815 N\ Suite 4	W 57th Ave		Part 2: Creditors with Nonpriority Unsecured Claims					
	, FL 33126-2363							
		Last 4 digits of account number						
Name an	d Address	On which entry in Part 1 or Part 2 did you	list the original creditor?					
	uy Credit Services	Line 4.9 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims					
	x 9001007 rille, KY 40290-1007		Part 2: Creditors with Nonpriority Unsecured Claims					
Louisv	ille, K1 40290-1007	Last 4 digits of account number						
Name an	d Address	On which entry in Part 1 or Part 2 did you	list the original creditor?					
Best B	uy Credit Services	Line 4.9 of (Check one):	Part 1: Creditors with Priority Unsecured Claims					
PO Bo	x 78009	·Chekulej.	Part 2: Creditors with Nonpriority Unsecured Claims					
Phoen	ix, AZ 85062-8009	Last 4 digits of account number						
Name an	d Address	On which entry in Part 1 or Part 2 did you	list the original creditor?					
	a/Syncb	Line 4.19 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims					
	x 530942	,	■ Part 2: Creditors with Nonpriority Unsecured Claims					
Allania	a, GA 30353-0942	Last 4 digits of account number						
Namean	d Address	On which entry in Part 1 or Part 2 did you	list the original creditor?					
	Partners LLC	Line 4.6 of (Check one):	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims					
	x 1378	Check one):						
Sherm	an, TX 75091	Last 4 digits of account number						
N : ::	4.6.44		List the extrinct and the C					
	d Address	On which entry in Part 1 or Part 2 did you	list the original creditor? Part 1: Creditors with Priority Unsecured Claims					
Capita	II OHE	Line 4.2 of (Check one):	a.c. 1. Oreations with a monthly office of the second					

Official Form 106 E/F

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Debtor 1 Debtor 2 Teresa E. Skipper	Case number (if known)
PO Box 71083 Charlotte, NC 28272-1083	■ Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Central Federal Credit Union CFE PO Box 958471 Lake Mary, FL 32795	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Citi Cards PO Box 9001037 Louisville, KY 40290-1037	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.13 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Home Depot Credit Services PO Box 9001010 Louisville, KY 40290-1010	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.12 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Macys PO Box 78008 Phoenix, AZ 85062-8008	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.25 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Mayo Clinic Florida PO Box 790124 Saint Louis, MO 63179-0124	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.16 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address MRS Associates 1930 Olney Ave. Cherry Hill, NJ 08003	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.7 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address MRS Associates 1930 Olney Ave. Cherry Hill, NJ 08003	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Nationwide Credit Inc PO Box 14581 Des Moines, IA 50306-3581	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.7 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Nationwide Credit Inc PO Box 740616 Atlanta, GA 30374	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Professional Service Bureau 911 Lund Blvd. Suite 100 Anoka, MN 55303-0548	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.16 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 1 Debtor 2 Keith K. Skipper Teresa E. Skipper		Case number (if known)
PSB Professional Service Bureau	Line 4.16 of (<i>Check one):</i>	☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 548 Anoka, MN 55303-0548		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did you	list the original creditor?
Shell	Line 4.11 of (<i>Check one)</i> :	☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 9001011		■ Part 2: Creditors with Nonpriority Unsecured Claims
Louisville, KY 40290-1011	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did you	list the original creditor?
Zwicker & Associates, PC	Line 4.14 of (<i>Check one):</i>	☐ Part 1: Creditors with Priority Unsecured Claims
10751 Deerwood Park Blvd		■ Part 2: Creditors with Nonpriority Unsecured Claims
Ste 100 Jacksonville, FL 32256	Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims	6b.	T	6 b.		
from Part 1		Taxes and certain other debts you owe the government		•	0.00
	6 C .	Claims for death or personal injury while you were intoxicated	6 C .	\$	0.00
	6 d .	Other. Add all other priority unsecured claims. Write that amount here.	6 d .	\$	0.00
	6 e.	Total Priority. Add lines 6a through 6d.	6 e .	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims from Part 2	6 g .	Obligations arising out of a separation agreement or divorce that you did			
monn art z	. 3	not report as priority claims	6g.	\$	0.00
	6 h.	Debts to pension or profit-sharing plans, and other similar debts	6 h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	70,233.72
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	70,233.72

Fill in this information	on to identify your case	:		
Debtor 1	Keith K. Skipper	Middle Name	Last Nam e	
Debtor 2 (Spouse if, filing)	Teresa E. Skipper	Middle Name	Last Name	
United States Bank	ruptcy Court for the:	MIDDLE DISTRICT OF	F L O R ID A	
Case number (if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B: Property (Official Form 106 A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code				State what the contract or lease is for
2.1		wame, wamber,	o treet, only, state and 211 o		
	Name				
	Number	S tre e t			<u></u>
	C ity		S ta te	ZIP Code	
2.2	Name				
	Number	S tre e t			
	City		S ta te	ZIP Code	
2.3	Name				
	Number	S tre e t			
	City		S ta te	ZIP Code	
2.4	Name				
	Number	S tre e t			
	City		S ta te	ZIP Code	

Official Form 106G

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Debtor 1 Debtor 2	Keith K. Skipper Teresa E. Skipper	Case number (_{If known})
	Additional Page if You Have More Contracts or Leases	
	Per son or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.5	a m e	-
N	umber Street	-

ZIP Code

City

S ta te

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Fill in this	information to identify your cas	e:			
Debtor 1	Keith K. Skipper	Middle Name	LactNama		
Debtor 2	Teresa E. Skipper	WIGGIE NAME	Last Name		
(Spouse if, f	iling) First Name	Middle Name	Last Name		
Unite d S t	ates Bankruptcy Court for the:	MIDDLE DISTRICT	OF FLORIDA		
Case nun	n b e r				
(if known)					☐ Check if this is an amended filing
Officia	al Form 106H				
Sched	ule H: Your Codeb	tors			12/15
together, b in the boxe every ques	ooth are equally responsible for sizes on the left. Attach the Additionation.	upplying correct inform al Page to this page. On	ation. If more space is needed the top of any Additional Pag	, copy the Additional F ges, write your name a	e. If two married people are filing Page, fill it out, and number the entries and case number (if known). Answer
1. Do	you have any codebtors? (If you	are filing a joint case, do	not list either spouse as a codeb	tor.	
■ No					
☐ Y e	S				
	thin the last 8 years, have you liv ornia, Idaho, Louisiana, Nevada, No				ates and territories include Arizona,
■ No	. Go to line 3.				
□ Y е	s. Did your spouse, former spouse,	or legal equivalent live w	ith you at the time?		
a cod	olumn 1, list all of your codebtors ebtor only if that person is a gual cial Form 106E/F), or Schedule G	antor or cosigner. Mak	e sure you have listed the cred	litor on Schedule D (O	
	Column 1: Your codebtor Name, Number, Street, City, State and ZIP C	o de		Column 2: The c	reditor to whom you owe the debt that apply:
3.1				☐ Schedule D, line	
	Name			□ Schedule E/F, li □ Schedule G, line	
	Number Street			- Schedule O, Illie	
	City	State	ZIP Code		
3.2				Schedule D, line	
	Name			□ Schedule E/F, li □ Schedule G, line	
	Number Street			-	
	City	State	ZIP Code		

Official Form 106H Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com Schedule H: Your Codebtors

Fill in this informa	tion to identify your case:	
Debtor 1	Keith K. Skipper	
Debtor 2 (Spouse, if filing)	Teresa E. Skipper	
United States Ban	nkruptcy Court for the: MIDDLE DISTRICT OF FLORIDA	
Case number (If known)		Check if this is: An amended filing A supplement showing postpetition chapter
O ffic ia I F o	rm 1061	13 income as of the following date:

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: **Describe Employment** Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. Employed Employed If you have more than one job, **Employment status** attach a separate page with □ Notemployed □ Notemployed information about additional e m p lo y e rs. Occupation OS 11 Include part-time, seasonal, or Employer's name **Advent Health** Volusia County School Board self-employed work. Employer's address Occupation may include student 900 Winderly Pl 200 N. Clara Ave or homemaker, if it applies. Maitland, FL 32751 Deland, FL 32721-2118 How long employed there? 14 months 3 months

Give Details About Monthly Income Part 2:

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be . 2,207.68 1,956.66 3. + \$ 3. Estimate and list monthly overtime pay. 0.00 0.00 Calculate gross Income. Add line 2 + line 3. 4. 2,207.68 1,956.66

Official Form 106I Schedule I: Your Income page 1

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Debt Debt		Keith K. Skipper Teresa E. Skipper	_	C a	se number (
				F	or Debtor 1	For Debtor 2 or non-filing spouse
	Сор	y line 4 here	4.	\$	2,207.68	\$ 1,956.66
5.	List	all payroll deductions:				
	5 a .		5 a .	\$		\$ 200.40
	5 b.	Tax, Medicare, and Social Security deductions	5 b.	\$	297.03	209.60
	5 c .	Mandatory contributions for retirement plans	5 c .	\$	0.00	\$ 58.70
	5 d .	Voluntary contributions for retirement plans	5 d .	\$	57.46	\$
	5 e .	Required repayments of retirement fund loans	5 e .	\$	0.00	\$ 0.00
	5 f.	Insurance	5 f.	\$	0.00	\$ 115.88
	5 g .	Domestic support obligations	5 g .	\$	0.00	\$
	5 h.	Union dues	5 h.+	\$	0.00	0.00
		Other deductions. Specify: Dental	_	\$	0.00	16.22
		Life Vision	_	\$	0.00	\$ <u>28.96</u> 7.80
		HSA	_	\$	0.00	\$ 50.00
		Token		\$	30.00	\$ 0.00
		Cafe		\$	10.77	\$ 0.00
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	395.26	\$ 487.16
7.	Calo	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,812.42	\$1,469.50
8.	List 8 a .	all other income regularly received: Net income from rental property and from operating a business,				
		profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total				
		monthly net income.	8 a .	\$	0.00	\$ 0.00
	8 b .	Interest and dividends	8 b .	\$	0.00	\$ 0.00
	8 C .	Family support payments that you, a non-filing spouse, or a dependent				
		regularly receive Include alimony, spousal support, child support, maintenance, divorce				
		settlement, and property settlement.	8 C .	\$	0.00	0.00
	8 d .	Unemployment compensation	8 d .	\$	0.00	0.00
	8 e .	Social Security	8 e .	\$	0.00	0.00
	8 f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance	:			
		that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.				
		Specify:	8 f.	\$		\$
	8 g .		— 8 g .	\$	0.00	3.00
	8 h.	Pension or retirement income	8 h .+	\$	50.37	0.00
		Other monthly income. Specify:			0.00	0.00
9.	Add	all other income. Add lines $8a+8b+8c+8d+8e+8f+8g+8h$.	9.	\$ _	50.37	\$0.00
10.	Calo	culate monthly income. Add line 7 + line 9.	10. \$		1,862.79 +	1,469.50 \$ 3,332.2
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				
11.	Incli othe Do	te all other regular contributions to the expenses that you list in <i>Schedule J</i> ude contributions from an unmarried partner, members of your household, your r friends or relatives. The contributions from an unmarried partner, members of your household, your relatives.	•		-	
	Spe	c ify:				11. \$ 0.0

Official Form 106I Schedule I: Your Income page 2

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De b	tor 2 Keitin	n K. Skipper esa E. Skipp				
12.	Add the an Write that a if it applies	amount on th	last column of line 10 to the amount in line 11. The result is the combined monthly income. Summary of Schedules and Statistical Summary of Certain Liabilities and Related	Data, ₁₂	. \$ _	3,332.29
						bined
13.	_				mon	thly income
13.	, ,	•	ase or decrease within the year after you file this form?			
	■ N 0					
	□ Ye	s. Explain:				

Fill in this information to identify your case:			
Debtor 1 Keith K. Skipper		c if this is:	
Debtor 2 (Spouse, if filing) Teresa E. Skipper		A supplement show 3 expenses as of t	ing postpetition chapter the following date:
United States Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA		лм / D D / Y Y Y Y	
Case number (If known)			
Official Form 106J			
Schedule J: Your Expenses			12/15
Be as complete and accurate as possible. If two married people are filing to more space is needed, attach another sheet to this form. On the top of any every question. Part 1: Describe Your Household Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No. Yes. Debtor 2 must file Official Form 106J-2, Expenses for the possible of two married people are filling to more space. If two married people are filling to more space is needed, attach another sheet to this form. On the top of any every question.	additional pages, write your n	ame and case numl	=
2. Do you have dependents? Do not list Debtor 1 and Yes. Fill out this information for	Dependent's relationship to	Dependent's	Does dependent
Dakter 2	Debtor 1 or Debtor 2	age	live with you?
- -			No Yes No Yes No
3. Do your expenses include expenses of people other than yourself and your dependents? No Yes			□ No □ Yes □ No □ Yes
expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses			No Yes No Yes No Yes Yes
expenses of people other than yourself and your dependents?	= ::		No Yes No Yes No Yes Ves
expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are us	heck the box at the top of the		No Yes No Yes No Yes Ves

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Debtor 1 Debtor 2	Keith K. Skipper Teresa E. Skipper	Case number (if known)	
If no	t included in line 4:		
4 a . 4 b .	Realestate taxes Property, homeowner's, or renter's insurance	4a. \$ 4b. \$	0.00
4 c . 4 d .	Home maintenance, repair, and upkeep expenses Homeowner's association or condominium dues	4c. \$	0.00
5. Addi	tional mortgage payments for your residence. Such as home equity loans	5. \$	0.00

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	D e b to D e b to	Keim K. Skipper	Case number (if known)	
Marker, seeer, garbage callection 6. 5 130.00	6. L	Milities:		
6b. Walter, saware, garbage callection 6c. Telephone, cell phone, letternet, sabelille, and cable services 6c. 5 238.00 6c. Other, Specify: 6c. 5 238.00 6c. Other, Specify: 6c. 5 238.00 6c. Other, Specify: 7c. 5 400.00 8c. Childcare and children's education costs 8c. 5 0.00 9c. Clothing, laundry, and dry cleaning 9c. 5 15.00 9c. Childcare and children's education costs 1c. 5 15.00 9c. Clothing, laundry, and dry cleaning 1c. 5 15.00 9c. Clothing, laundry, and dry cleaning 1c. 5 15.00 9c. Clothing, laundry, and dry cleaning 1c. 5 15.00 9c. Clothing, laundry, and dry cleaning 1c. 5 15.00 9c. Clothing, laundry, and dry cleaning 1c. 5 15.00 9c. Clothing, laundry, and dry cleaning 1c. 5 15.00 9c. Clothing, laundry, and services 1c. 5 15.00 9c. Clothing, laundry, and iterative, and laundry and	6		6 a . \$	140.00
6c. Telephone, cell phone, Internet, sate little, and cable services 6d. Other, Specify: 6d. 5 0.000 7. Food and housekeeping supplies 7. 5 400.00 9. Clothing, Laundry, and dry cleaning 9. 5 15.00 10. Personal care products and services 11. 5 15.00 11. Personal care products and services 11. 5 15.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. 5 100.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. 5 0.00 14. Charitable contributions and religious donations 15. Insurance. 16. Insurance. 17. Insurance. 18. Learner and this straince and this straince in the strain fare. 18. Learner and this straince in the strain fare. 18. Learner and this straince in the strain fare. 18. Learner and this straince in the strain fare. 18. Learner and this straince in the strain fare. 18. Learner and this straince in the strain fare. 18. Learner and this straince in the strain fare. 18. Learner and this straince in the strain fare. 18. Learner and this straince in the strain fare. 18. Learner and this straince in the strain fare and the strain fare and this straince in the strain fare and this straince in the strain fare and the strain fare	6		6 b . \$	
Food and housekeeping supplies		·		
Childcare and children's education costs		d. Other. Specify:		0.00
Citching, laundry, and dry cleaning	⁷ . F	ood and housekeeping supplies	7. \$	400.00
10 Personal care products and services 10 5 15:00	8. C	Childcare and children's education costs	8. \$	0.00
1.	⁹ . C	Clothing, laundry, and dry cleaning	9. \$	15.00
Transportation, include gas, maintenance, bus or train fare. 10.00	¹⁰ . P	Personal care products and services	10. \$	15.00
Transportation, include gars, maintenance, bus or train fare. 12. \$ 100.00	- 11	Medical and dental expenses	11. \$	0.00
Denot include Cat payments 100.00	12. T	ransportation Include gas, maintenance, bus or train fare.		
14. Charitable contributions and religious donations 14. 1. 1. 1. 1. 1. 1. 1	Ď	o not include car payments.	12. \$	100.00
14. Charitable contributions and religious donations 14. S 0.00	¹³ . E	Intertainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
15			14. \$	
Do not include insurance deducted from your pay or included in lines 4 or 20.	4.5	•		
15b. Health insurance 15b. 5				
15b. Health insurance 15b. \$ 239.00 15c. Vehicle insurance 15c. \$ 239.00 15d. Other insurance. Specify: 15d. \$ 0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 5 0.00 Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Taxes. Do not include taxes deducted from your pay on line 5 or 4 ship to the ship	1	5a. Life insurance	15a. \$	101 00
15c. Vehicle insurance 15c. S 239.00 15d. Other insurance. Specify: 15d. S 0.00	1	5b. Health insurance	15b. \$	
15d. Other insurance. Specify: 16d. \$ 0.00			15c. \$	
Specify: 17a. Specify: 17b. Specify: 17c. Carpayments for Vehicle 1 17b. Carpayments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d.			15d. \$	
Specify: 17a. Specify: 17b. Specify: 17c. Carpayments for Vehicle 1 17b. Carpayments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d.	16. T	axes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
17a	S	pecify:	16. \$	0.00
17b. Car payments for Vehicle 2 17c. Other, Specify: 17c. \$ 346.12 17c. Other, Specify: 17c. \$ 0.00 17d. Other, Specify: 17d. \$ 0.00 18 Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 1061). 18. \$ 0.00 19. Other payments you make to support others who do not live with you. \$ 0.00 19. Other payments you make to support others who do not live with you. \$ 0.00 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income- 20a. Mortgages on other property 20a. \$ 0.00 20b. Realestate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 21. Other: Specify: 21. +\$ 0.00 22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 1061-2 \$ 3,319.12 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule 1. 23a. \$ 3,332.29 23b. Copy your monthly expenses from line 22c above. 23b. \$ 3,319.12	17. lı	nstallment or lease payments:		
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21. +\$ 0.00 22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. 23a. Copy line 12 23b. Copy your monthly net income. 23a. Copy line 12 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income.		· · · · · · · · · · · · · · · · · · ·		
22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. 23c. Copy line 12 23c. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income.				0.00
22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. 3,319.12 23c. Calculate your monthly net income. 23a. Copy line 12 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income.	^{21.} C	Other: Specify:	21. +\$	0.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. 23c. Copy line 12 (your combined monthly income) 23a. Copy your monthly expenses from line 22c above. 23b. Copy your monthly expenses from your monthly income.	22. C	Calculate your monthly expenses		
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. 23. Calculate your monthly net income. 23a. Copy line 12 23b. Copy your monthly expenses from line 22c above. 23a. Subtract your monthly expenses from your monthly income.	2	2a. Add lines 4 through 21.	\$	3.319.12
23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 3,332.29 23b. Copy your monthly expenses from line 22c above. 23b\$ 3,319.12	2	2b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	0,017.12
Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income.	2	2c. Add line 22a and 22b. The result is your monthly expenses.	\$	3 310 12
23a. Copy line 12 (your combined monthly income) 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income.	2.2			0,017.12
23b. Copy your monthly expenses from line 22c above. 23b \$ 3,332.27 23c. Subtract your monthly expenses from your monthly income.	_			
23c. Subtract your monthly expenses from your monthly income.	2	3a. Copy line 12 (your combined monthly income) from Schedule I.		3,332.29
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income: 23c. \$ 13.17	2	3D. Copy your moπtnly expenses from line 22c above?	23D\$	
The result is your monthly net income. 13.17	n	2c. Cubtract your monthly avanances from your monthly income		
monthly net income 13.17	2	The result is your	23c. \$	40.47
		monthly net income		13.17

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Debtor 1 Debtor 2	Keith K. Skipper Teresa E. Skipper	Case number (if known)
Fore	fication to the terms of your mortgage?	ear after you file this form? do you expect your mortgage payment to increase or decrease because of a
\Box Y	es. Explain here:	

Fill in this informa	ation to identify your case	e:					
Debtor 1	Keith K. Skipper	Middle Name		astName			
Debtor 2 (Spouse if, filing)	Teresa E. Skipper	Middle Name		ast Name			
		MIDDLE DISTRIC					
United States Bank	ruptcy Court for the:						
Case number (if known)							☐ Check if this is an amended filing
Official Form	106Dec on About an	Individua	l Debtor	's Sc	hedules		12/15
							1210
If two married peo	ple are filing together, bo	th are equally respo	nsible for supplyi	ing corre	ct information.		
							aling property, or obtaining money or Dyears, or both. 18 U.S.C. §§ 152, 1341,
Sign	Below						
Did you pay	or agree to pay someone	who is NOT an attor	ney to help you f	ill out ba	nkruptcy forms	?	
■ No							
Yes. N	ame of person					Attach	nkruptcy Petition Preparer's Notice,
							n, and Signature
	y of perjury, I declare tha true and correct.	ut I have read the sur	nmary and sched	dules fileo	d with this declar	ation and	
	n K. Skipper				eresa E. Skipp	er	
Keith K . Signature	Skipper of Debtor 1			Tere: Signal	sa E. Skipper ture of Debtor 2		
Date <u>F</u>	ebruary 28, 2019			Date	February 28	, 2019	

Official Form 106Dec

Fill in this infor	mation to identify your ca	se:			
Debtor 1	Keith K. Skipper	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Teresa E. Skipper	- Middle Name	Last Name		
United States	Bankruptcy Court for the:	MIDDLE DISTRICT OF F	LORIDA		
Case number (if known)					☐ Check if this is an amended filing
Official F	orm 107				
Statemen	t of Financial Af	fairs for Individua	ls Filing for Bank	ruptcy	4/10
Be as complete	and accurate as possible. If	two married people are filing	together, both are equally re	esponsible for supplying	g correct information. If more
	·	tal Status and Where You Liv	1 0 . 3	ame and case number (if known). Answer every question
		tal Status and Write e Fou Liv	red beloite		
1. What is yo	our current marital status?				
■ Marri □ Notm	ed arried				
2. During the	e last 3 years, have you live	d anywhere other than where	you live now?		
■ N o					
Y es. I	List all of the places you live	d in the last 3 years. Do not inc	lude where you live now.		
Debtor 1	Prior Address:	Dates Debtor 1 li there	ved Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	ttlers Trail oud, FL 34772	From -To: 1998-10/16	■ Same as Debtor 1		■ Same as Debtor 1 From-To:
3. Within the territories include	e last 8 years, did you ever e Arizona, California, Idaho	ive with a spouse or legal equ , Louisiana, Nevada, New Mexi	ivalent in a community prope co, Puerto Rico, Texas, Washi	erty state or territory? (ngton and Wisconsin.)	Community property states and
■ No □ Yes.	Make sure you fill out <i>Sch</i> ec	dule H: Your Codebtors ^{(Officia}	l Form 106H).		
Part 2 Exp	lain the Sources of Your In	ncome			
Fill in the t	otal amount of income you r	byment or from operating a busceived from all jobs and all busceive income that you receive toge	sinesses, including part-time ac	tivities.	years?
N oY es. I	Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply	Gross income (before deductions and exclusions)

Official Form 107

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			Case	number (_{if known}	
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:		Wages, commissions, bonuses, tips	\$3,570.47	■ Wages, commissions, bonuses, tips	\$1,719.6
		Operating a business		Operating a business	
For last calenda (January 1 to D	ar year: ecember 31, 2018)	■ Wages, commissions, bonuses, tips	\$66,772.00	□ Wages, commissions, bonuses, tips	\$0.0
		Operating a business		Operating a business	
	r year before that: ecember 31, 2017)	■ Wages, commissions, bonuses, tips	\$128,857.00	■ Wages, commissions, bonuses, tips	\$0.00
		Operating a business		Operating a business	
Yes. F	ill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Cross income
					Gross income (before deductions and exclusions)
For last calenda (January 1 to D	ar year: ecember 31, 2018)	IRA Distribution	\$17,094.00		(before deductions

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otor 1 otor 2	Keith K. Skipper Teresa E. Skipper		Cas	e number (_{if known})	
■ Y	During the 90 days before y ☐ No. Go to line 7. ■ Yes List below ea	oth have primarily consumer debts. You filed for bankruptcy, did you pay an the creditor to whom you paid a total of domestic support obligations, such as cl	\$600 or more and the t	otal amount you paic	d that creditor. Do not include ude payments to an attorney for this
Cred	itor's Name and Address	Dates of payment	Total amount	Amount you still owe	Was this payment for
Attn: 8950	Cooper : Bankruptcy O Cypress Waters Blvd pell, TX 75019	December 2018, January & February 2019	\$3,525.00	\$144,529.00	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other □ -
Attn: Po B	oln Automotive Financial Se : Bankruptcy Box 542000 aha, NE 68154	ervice December 2018, January & February 2019	\$1,257.00	\$21,827.00	
Attn: Po B	tander Consumer USA : Bankruptcy Box 961245 Worth, TX 76161	December 2018, January & February 2019	\$1,038.00	\$14,288.00	
Inside of whi a busi a lim or	ers ich you are an officer, director, iness you operate as a sole pro	nkruptcy, did you make a payment or eneral partners; relatives of any gen person in control, or owner of 20% (oprietor. 11 U.S.C. § 101. Include pa	ormore of their votin	g securities; and a	ny managing agent, including one f
ΠΥ					

7.

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	htor 1 Keith K. Skipper Teresa E. Skipper		Case numb	er (_{if known})				
8.	Within 1 year before you filed for bankruptcy, of include payments on debts guaranteed or cos	did you make any payments igned by an insider.	or transfer any property o	n account of	a debt that benefit	ed an insider?		
	■ No □ Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount A	mount you	Reason for this p			
			paid	still owe	Include creditor's	s nam e		
Par	rt 4: Identify Legal Actions, Repossessions, an	d Foreclosures						
9.	Within 1 year before you filed for bankruptcy, which is tall such matters, including personal injury modifications, and contract disputes.	were you a party in any laws cases, small claims actions	suit, court action, or admin , divorces, collection suits	istrative proc , paternity ac	ceeding? : tions , support or c	us to dy		
	No Yes. Fill in the details.							
	Case title Case number	Nature of the case	Court or agency		Status of the case			
	Barclays Bank Delaware vs. Keith Skipper 2018-14659-CODL	Collection	Volusia County Deland, FL 32720		☐ Pending ☐ On appeal ■ Concluded			
					Judgment			
	Discover Bank vs. Teresa Skipper 2018-11868-CODL	Collection	Volusia County Deland, FL 32720		■ Pending □ On appeal □ Concluded			
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.							
	No. Go to line 11. Yes. Fill in the information below.							
	Creditor Name and Address	Describe the Property Date				Value of the property		
11.	refuse to make a payment because you owed a d		a bank or financial institut	ion, set off ar	ny amounts from yo	our accounts or		
	No Yes. Fill in the details.							
	Creditor Name and Address	Describe the action the cr	reditor took	Date a	action was	Amount		
12.	Within 1 year before you filed for bankruptcy, v receiver, a custodian, or another official?	was any of your property in t	the possession of an assig	nee for the b	enefit of creditors,	a court-appointed		
	No Yes							

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	tor 1 tor 2	Keith K. Skipper Teresa E. Skipper		Case num	ber (_{if known})	
Par	t 5:	List Certain Gifts and Contributions				
13.	■ N		cy, did y	ou give any gifts with a total value of more than	\$600 per person?	
	perso	on to Whom You Gave the Gift and	oer	Describe the gifts	Dates you gave the gifts	Value
14.	■ N			ou give any gifts or contributions with a total va	lue of more than \$600 to an	y charity?
	than S Chari	or contributions to charities that total \$600 ty's Name PSS (Number, Street, City, State and ZIP Code)	more	Describe what you contributed	Dates you contributed	Value
Par	t 6:	List Certain Losses				
15.	■ N	,	cy or sinc	e you filed for bankruptcy, did you lose anything	g because of theft, fire, other	disaster, or gambling?
		ribe the property you lost and how ss occurred	In c lu d e	the any insurance coverage for the loss the amount that insurance has paid. List pend ce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7:	List Certain Payments or Transfers				
16.	seekin	g bankruptcy or preparing a bankrup	tcy petition	u or anyone else acting on your behalf pay or tra on? redit counseling agencies for services required in y		ne you consulted about
	□ N ■ Y	o es. Fill in the details.				
	Addre Email	on Who Was Paid ess or website address on Who Made the Payment, if Not You		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	4649 Suite	yl S Zust PA Clyde Morris Blvd. • 610 Orange, FL 32129		Attorney Fees- \$2000 Filing Fee- \$335 Credit Reports- \$80	December 2018	\$2,000.00

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	otor 1 otor 2	Keith K. Skipper Teresa E. Skipper			C	ase number (_{if i}	anown)	
17.	you de	n 1 year before you filed for bankruptcy, o eal with your creditors or to make paymer tinclude any payment or transfer that you lis	nts to your cred	one else acting litors?	on your behalf pa	ay or transfer	any property to anyo	ne who promised to help
	_	es. Fill in the details.						
	Perso Addro	on Who Was Paid ess	Descrip transfer		e of any property		Date payment or transfer was made	Amount of payment
18.	ordina Includ transfe	n 2 years before you filed for bankruptcy, ary course of your business or financial afte both outright transfers and transfers made a rs that you have already listed on this statem No	fairs? as security (such	ade, or otherv	vise transfer any p g of a security inter	oroperty to an	yone, other than prop e on your property). D	perty transferred in the o not include gifts and
	Addr	on Who Received Transfer ess on's relationship to you	Descrip transfer	otion and valu rred	e of property		y property or eceived or debts nange	Date transfer was made
19.	(Thes	n 10 years before you filed for bankruptcy e are often called <i>asset-protection device</i> s No (es. Fill in the details.)	sfer any prope	rty to a self-settle	ed trust or sim	ilar device of which y	you are a beneficiary?
	Name	e of trust	Descrip	otion and valu	e of the property	transferred		Date Transfer was made
Par	t 8:	List of Certain Financial Accounts, Instru	uments, Safe Do	eposit Boxes,	and Storage Units	6		
20.	transf Include funds,	n 1 year before you filed for bankruptcy, verred? de checking, savings, money market, or oth , cooperatives, associations, and other fina No Yes. Fill in the details.	her financial ac	counts; certifi				
		e of Financial Institution and Address per, Street, City, State and ZIP Code)	Last 4 digits account num		Type of account of instrument	clos	e account was sed, sold, moved, ransferred	Last balance before closing or transfer
	PO E	tral Florida Educators FCU 3ox 2189 ndo, FL 32802	XXXX-		■ Checking □ Savings □ Money Marke □ Brokerage □ Other		15/18	\$100.00
	Annı	uity	XXXX-		Checking Savings Money Marke Brokerage Other	20 ²	18	\$499.20

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	otor 1 otor 2	Keith K. Skipper Teresa E. Skipper		Case number (_{if known})	
21.	_	rou now have, or did you have within 1 year bef ables?	ore you filed for bankruptcy, any safe	deposit box or other depository for secu	rities, cash, or other
		No Yes. Fill in the details.			
		ne of Financial Institution	Who else had access to it?	Describe the contents	Do you still have
	Add	Iress (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)		it?
22.	Have	e you stored property in a storage unit or place	other than your home within 1 year be	efore you filed for bankruptcy?	
		No Yes. Fill in the details.			
	Nar	ne of Storage Facility	Who else has or had access to	Describe the contents	Do you still have
	Ado	Iress (Number, Street, City, State and ZIP Code)	it? Address (Number, Street, City, State and ZIP Code)		it?
Pai	rt 9:	Identify Property You Hold or Control for So	meone Else		
23.	Doy	ou hold or control any property that someone el	se owns? Include any property you bor	rrowed from, are storing for, or hold in tr	ust for someone.
		No Yes. Fill in the details.			
		ner's Name dress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Pai	rt 10:	Give Details About Environmental Information	on		
For	the pu	urpose of Part 10, the following definitions appl	v:		
-	Enw subs clea Site oper	ironmental law means any federal, state, or local stances, wastes, or material into the air, land, so nup of these substances, wastes, or material. means any location, facility, or property as definate, or utilize it, including disposal sites.	al statute or regulation concerning poll oil, surface water, groundwater, or othe ned under any environmental law, who	ner medium, including statutes or regulate ther you now own, operate, or utilize it	tions controlling the
		utant, contaminant, or similar term.			
Rep	ort all	notices, releases, and proceedings that you kn	now about, regardless of when they or	ccurred.	
24.	Has	any governmental unit notified you that you ma	ay be liable or potentially liable under	or in violation of an environmental law?	
		No Yes. Fill in the details.			
	Nar	me of site	Governmental unit	Environmental law, if you know it	Date of notice
	Add	Iress (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)		

Debtor 1

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	tor 1 Keith K. Skipper Teresa E. Skipper		Case number (_{if known})	
25.	Have you notified any governmental unit of any i	release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adminis	trative proceeding under any environmen	stal law? Include settlements and orders.	
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	t 11: Give Details About Your Business or Conn	ections to Any Business		
27.	Within 4 years before you filed for bankruptcy, d A sole proprietor or self-employed in a te A member of a limited liability company A partner in a partnership An officer, director, or managing execut An owner of at least 5% of the voting or No. None of the above applies. Go to Part Yes. Check all that apply above and fill in the	rade, profession, or other activity, either factivity, either factivity or limited liability partnership (LLP) ive of a corporation equity securities of a corporation 12. The details below for each business.	full-time or part-time	
	Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security num Dates business existed	ber or ITIN.
28.	Within 2 years before you filed for bankruptcy, d creditors, or other parties. No Yes. Fill in the details below.	id you give a financial statement to anyor		cial institutions,
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		

Debtor 1

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Debtor 1 Debtor 2 Keith K. Skipper Teresa E. Skipper	Case number (_{if known})
Part 12: Sign Below	
correct. I understand that making a false st	of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and atement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case
can result in fines up to \$250,000, or impris 18 U.S.C. §§ 152, 1341, 1519, and 3571.	confinent for up to 20 years, or both.
/s/ Keith K. Skipper Keith K. Skipper Signature of Debtor 1	
Date February 28, 2019	Date February 28, 2019
Did you attach additional pages to <i>your Sta</i> No Yes	atement of Financial Affairs for Individuals Filing for Bankruptcy ^{(Official} Form 107)?
Did you pay or agree to pay someone who	is not an attorney to help you fill out bankruptcy forms?
Yes. Name of Person Attach th	(Official Form 119). Bankruptcy Petition Preparer's Notice, Declaration, and Signature

Fill in this inform	ation to identify your case:		
Debtor 1	Keith K. Skipper First Name Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	Teresa E. Skipper First Name Middle Name	Last Name	
United States Banl	kruptcy Court for the: MIDDLE DISTRI	ICT OF FLORIDA	
Case number (if known)			☐ Check if this is an amended filing
Official Fo	rm 108		
Statement	t of Intention for Individ	duals Filing Under Chapter 7	12/15
you have leased You must file this earlier, If two married per form. Be as complete and and cas	unless the court extends the time for cause. You ople are filing together in a joint case, both and accurate as possible. If more space is needed number (if known).	ired. file your bankruptcy petition or by the date set for the mee four must also send copies to the creditors and lessors you li re equally responsible for supplying correct information. Be d, attach a separate sheet to this form. On the top of any acceptance of the company of the company and the company acceptance of the compa	st on the form oth debtors must sign and date the dditional pages, write your name
below.	ditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's L name: Description of property securing debt:	incoln Automotive Financial Service 2017 Ford Escape 27,000 miles VIN No.: 1FMCU0JD2HUC84797	 Surrender the property. Retain the property and redeem it. ■ Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: 	■ No □ Yes
Creditor's N name: Description of property securing debt:	Ar. Cooper 803 Gordonia Ct. Deland, FL 32724 Volusia County	□ Surrender the property. □ Retain the property and redeem it. ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	□ No ■ Yes
Creditor's c	Cantandor Concumor USA	□ Surrender the property	■ No.

Official Form 108

name:

Statement of Intention for Individuals Filing Under Chapter 7

 \square Surrender the property.

 $\hfill \square$ Retain the property and redeem it.

■ Retain the property and enter into a Reaffirmation

Santander Consumer USA

N o

☐ Y es

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ebtor 1 Keith K. Skipper ebtor 2 Teresa E. Skipper	Case number (_{if known})	
Description of property 2014 Kia Optima 41,000 miles VIN No.: 5XXGM4A72EG288437	Agreement. Retain the property and [explain]:	_
List Your Unexpired Personal Property Leases r any unexpired personal property lease that you listed in Sched ormation below. Do not list real estate leases. Unexpired leases a expired personal property lease if the trustee does not assume it.	are leases that are still in effect; the lease period has no	fficial Form 106G), fill in the ot yet ended. You may assume an
escribe your unexpired personal property leases		Will the lease be assumed?
essor's name: escription of leased		□ No
operty:		☐ Yes
essor's name:		□ No
escription of leased coperty:		Y es
essor's name:		□ No
escription of leased operty:		☐ Y es
essor's name:		□ No
escription of leased operty:		☐ Y es
ssor's name:		□ No
escription of leased operty:		☐ Yes
ssor's name:		□ No
escription of leased operty:		☐ Yes
essor's name:		□ No
escription of leased roperty:		☐ Y es
art 3: Sign Below		
der penalty of perjury, I declare that I have indicated my intent oject to an unexpired lease.	tion about any property of my estate that secures a del	bt and any personal property that
/s/ Keith K. Skipper	X _/s/ Teresa E. Skipper	
Keith K. Skipper Signature of Debtor 1	Teresa E. Skipper Signature of Debtor 2	
Date February 28, 2019	Date February 28, 2019	

Fill in this information to identify your case: Debtor 1 Keith K. Skipper	Check one box only as directed in this form and in Form 122A-1Supp:
Debtor 2 Teresa E. Skipper	■ 1. There is no presumption of a buse
United States Bankruptcy Court for the: Middle District of Florida Case number (if known)	2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2). 3. The Means Test does not apply now because of qualified military service but it could apply later.
	☐ Check if this is an amended filing
Official Form 122A - 1	
Chapter 7 Statement of Your Current Mo	nthly Income 12/1
Part 1: Calculate Your Current Monthly Income 1. What is your marital and filing status? Check one only. Not married Fill out Column A, lines 2-11.	
■ Married and your spouse is filing with you. Fill out both Colum	ns A and B, lines 2-11.
☐ Married and your spouse is NOT filing with you. You and your	•
☐ Living in the same household and are not legally separated	Fill out both Columns A and B, lines 2-11.
	, lines 2-11; do not fill out Column B. By checking this box, you declare under arated under nonbankruptcy law that applies or that you and your spouse are ans Test requirements. 11 U.S.C § 707(b)(7)(B).
	during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For ch 1 through August 31. If the amount of your monthly income varied during the 6 months, not include any income amount more than once. For example, if both spouses own the fyou have nothing to report for any line, write \$0 in the space.
	Column A Debtor 1 Debtor 2 or non-filing spouse
Your gross wages, salary, tips, bonuses, overtime, and commissi payroll deductions).	.,,
3. Alimony and maintenance payments. Do not include payments fr Column B is filled in.	om a spouse if \$
4. All amounts from any source which are regularly paid for househ or your dependents, including child support. Include regular cont unmarried partner, members of your household, your dependent roommates. Include regular contributions from a spouse only if C in. Do not include payments you listed on line 3	ibutions from an s, parents, and
5. Net income from operating a business, profession, or farm	Debtor 1
Gross receipts (before all deductions) \$	0.00
Ordinary and necessary operating expenses _\$	0.00
Net monthly income from a business, profession, or farm \$	0.00 Copy here -> \$ 0.00 \$ 0.00

⁶. Net income from rental and other real property

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Debtor 1 Debtor 2 Teresa E. Skipper Teresa E. Skipper	Case number (if known)
	Debtor 1
Gross receipts (before all deductions)	\$ 0.00
Ordinary and necessary operating expenses	-\$0.00
Net monthly income from rental or other real property	\$\$ Copy here -> \$\$ 0.00 \$\$
7. Interest, dividends, and royalties	\$\$0.00

Debto	Kelili K. Skibbei		Case number	(if known			
			Column A Debtor 1		Column B Debtor 2 or non-filing sp		
	Unemployment compensation Do not enter the amount if you contend that the amount received under the Social Security Act. Instead, list it here: For you \$	was a benefit	\$	0.00	\$	0.00	
	For your spouse \$	0.00					
	Pension or retirement income. Do not include any amount receive benefit under the Social Security Act.		\$	0.00	\$	0.00	
	Income from all other sources not listed above. Specify the source not include any benefits received under the Social Security Actor as a victim of a war crime, a crime against humanity, or internatio terrorism. If necessary, list other sources on a separate page and	nal or dom e s tic					
			\$ 	0.00	\$	0.00	
	Total amounts from separate pages, if any.	+	\$	0.00	\$	0.00	
11.	Calculate your total current monthly income. Add lines 2 through a column. Then add the total for Column A to the total for Column B	10 for each \$	1,785.02	+ \$	2,019.73	Total current monthly income	
Part	Determine Whether the Means Test Applies to You						
	Calculate your current monthly income for the year. Follow these	s te ps:					1
	12a. Copy your total current monthly income from line 11		Сору	line 11 he	ere=>	\$3,804.75	
	Multiply by 12 (the number of months in a year)					x 12	,
	12b. The result is your annual income for this part of the form				12b	45,657.00	
	Calculate the median family income that applies to you. Follow the Fill in the state in which you live.	ese steps:					J
	Fill in the number of people in your household.	2					7
	Fill in the median family income for your state and size of househ To find a list of applicable median income amounts, go online us in for this form . This list may also be available at the bankruptcy cler	ng the link specified	in the separa	te instruct	13. ions	\$58,960.00	
	How do the lines compare? 14a. Line 12b is less than or equal to line 13. On the top of Go to Part 3. Line 12b is more than line 13. On the top of page 1, Go to Part 3 and fill out Form 122A-2.						
Part	3: Sign Below By signing here, I declare under penalty of perjury that the in	iformation on this sta	atement and i	n anv atta	chments is tr	THE AND COTTECT	
					vam v 11 (3 13 11	as and 6011666.	
	X /s/ Keith K. Skipper	X /s/ Tere	sa E. Skippe	er			

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Deblor 1 Deblor 2 Teresa E. Skipper Teresa E. Skipper	Case number (if known)
Keith K. Skipper Signature of Debtor 1	Teresa E. Skipper Signature of Debtor 2
Pate February 28, 2019 MM / DD / YYYY	Pebruary 28, 2019 MM / DD / YYYYY
If you checked line 14a, do NOT fill out or file Form 122A-2.	
If you checked line 14b, fill out Form 122A-2 and file it with this fo	rm.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts.

are defined in 11 U.S.C.

Sometimer debts
Incurred by an individual

primarily for a personal, family, or

household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chap	ter 7:	Liquidation
	\$245	filing fee
	\$75	a d m in is tra tive fee
+	\$15	trustee surcharge
	\$335	to ta I fe e

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obliqations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or the ft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcoholor drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount.

Monthly Income \ individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, Chapter 7 Means Test Calculation (Official Form 122 A-2).

If your income is above the median for your state, you must file a second form — the

must file a second form — the Chapter 7 Means Test
Calculation
on the form — sometimes called the
— deduct from your income living expenses and
Test
payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test'* the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Claim as Exempt list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

administrative fee \$550 \$1,717 total fe e

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or the ft.

debts for fraud or defalcation while acting in a fiduciary capacity,

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\$200 filing fee \$75 administrative fee \$275 to ta I fe e

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee \$75 administrative fee \$310 to ta I fe e

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a ... If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit

And Debt Counselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Middle District of Florida

In re	Keith K. Skipper Teresa E. Skipper		Case No.				
	Torosa Er emppor	Debtor(s)	Chapter 7				
VERIFICATION OF CREDITOR MATRIX							
The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.							
Date:	February 28, 2019	/s/ Keith K. Skipper					
		Keith K. Skipper Signature of Debtor					
Date:	February 28, 2019	/s/ Teresa E. Skipper	_/s/ Teresa E. Skipper				
		Teresa E. Skipper					
		Signature of Debtor					
Date:	February 28, 2019	/s/ Sheryl S Zust					
		Signature of Attorney					
		Sheryl S Zust 0934259					
		Sheryl S Zust PA					
		4649 Clyde Morris Blvd.					
		Suite 610					

Port Orange, FL 32129 (386) 258 3900

Keith K. Skipper 803 Gordonia Ct. Deland FL 32724 Capio Partners LLC PO Box 1378 Sherman TX 75091 Citibank North America Citibank Corp/Centralized Bankruptc Po Box 790034 St Louis MO 63179

Teresa E. Skipper 803 Gordonia Ct. Deland FL 32724 Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City UT 84130 Citibank/Exxon Mobile Centralized Bankruptcy Po Box 790034 St Louis MO 63179

Sheryl S Zust Sheryl S Zust PA 4649 Clyde Morris Blvd. Suite 610 Port Orange, FL 32129 Capital One PO Box 71083 Charlotte NC 28272-1083 Citibank/Shell Oil Centralized Bankruptcy Po Box 790034 St Louis MO 63179

Andreu, Palma, Lavin & Solis, PLLC 1000 NW 57th Court Suite 400 Miami FL 33126 Central Federal Credit Union CFE PO Box 958471 Lake Mary FL 32795 Citibank/The Home Depot Attn: Recovery/Centralized Bankrup Po Box 790034 St Louis MO 63179

Andreu, Palma, Lavin & Solis, PLLC 815 NW 57th Ave Suite 401 MiamiFL 33126-2363 Central FI Educators F 1200 Weber St Orlando FL 32803 Citicards Cbna Citi Bank Po Box 6077 Sioux Falls SD 57117

Barclays Bank Delaware Attn: Correspondence Po Box 8801 Wilmington DE 19899

Central Florida Regional Hospi c/o Capio Partners Llc Attn: Bankruptcy Po Box 3498 Sherman TX 75091 Discover Financial Po Box 3025 New Albany O H 43054

Best Buy Credit Services PO Box 9001007 Louisville KY 40290-1007 Central Florida Regional Hospital PO Box 1828 Sanford FL 32772-1828 Ford Credit PO Box 542000 Omaha NE 68154-8000

Best Buy Credit Services PO Box 78009 Phoenix AZ 85062-8009 Chase Card Services Correspondence Dept Po Box 15298 Wilmington DE 19850 Home Depot Credit Services PO Box 9001010 Louis ville KY 40290-1010

B P V is a /S y n c b P O B o x 5 3 0 9 4 2 A tlanta G A 3 0 3 5 3 - 0 9 4 2 Citi Cards PO Box 9001037 Louis ville KY 40290-1037 Kohls /Capital One Kohls Credit Po Box 3120 Milwaukee W I 53201 Lincoln Automotive Financial Service Attn: Bankruptcy Po Box 542000

Omaha NE 68154

Professional Service Bureau 911 Lund Blvd. Suite 100 Anoka MN 55303-0548 Synchrony Bank/Lowes Attn: Bankruptcy Dept Po Box 965060 Orlando FL 32896

Macys PO Box 78008 Phoenix AZ 85062-8008 PSB Professional Service Bureau PO Box 548 Anoka MN 55303-0548 Visa Dept Store National Bank/Ma Attn: Bankruptcy Po Box 8053 Mason OH 45040

Mayo Clinic 4500 San Pablo Rd. Jacksonville FL 32224 S antander P O B o x 660633 D a lla s T X 75266-0633 W.S. Badcock Corp Attn: Bankruptcy 200 North Phosphate Blvd Mulberry FL 33860

Mayo Clinic Florida PO Box 790124 Saint Louis MO 63179-0124 Santander Consumer USA Attn: Bankruptcy Po Box 961245 Fort Worth TX 76161 Zwicker & Associates, PC 10751 Deerwood Park Blvd Ste 100 Jacksonville FL 32256

Mr. Cooper Attn: Bankruptcy 8950 Cypress Waters Blvd Coppell TX 75019 Shell PO Box 9001011 Louisville KY 40290-1011

MRS Associates 1930 Olney Ave. Cherry Hill NJ 08003 S ync b/P L C C Attn: Bankruptcy Po Box 965060 Orlando F L 32896

Nationwide Credit Inc PO Box 14581 Des Moines IA 50306-3581 Synchrony Bank Attn: Bankruptcy Dept Po Box 965060 Orlando FL 32896

Nationwide Credit Inc PO Box 740616 Atlanta GA 30374 Synchrony Bank/Amazon Attn: Bankruptcy Dept Po Box 965060 Orlando FL 32896

PayPal Credit PO Box 71202 Charlotte NC 28272-1202 Synchrony Bank/Chevron Attn: Bankruptcy Dept Po Box 965060 Orlando FL 32896 B 2 0 3 0 (Form 2 0 3 0) (1 2 / 1 5)

United States Bankruptcy Court Middle District of Florida

In re	Keith K. Skipper Teresa E. Skipper		Case No.			
	Deb	tor(s)	Chapter	7		
	DISCLOSURE OF COMPENSATION	OF ATTORNEY	FOR DE	EBTOR(S)		
c	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:					
	For legal services, I have agreed to accept		\$	2,000.00		
	Prior to the filing of this statement I have received		\$	2,000.00		
	Balance Due		\$	0.00		
2. T	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3. Т	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4. I	I have not agreed to share the above-disclosed compensation with a	ny other person unless t	hey are mem	bers and associates of my law firm.		
I	☐ I have agreed to share the above-disclosed compensation with a percopy of the agreement, together with a list of the names of the people					
5. I	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
b c	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Drafting of Petition and Schedules; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; attendance at meeting of creditors. 					
6. E	By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions, redemption actions, relief from stay actions, objections to exemptions, or any other adversary proceeding.					
	CERTIFICA	ATION				
	certify that the foregoing is a complete statement of any agreement or ankruptcy proceeding.	arrangement for paymen	nt to me for r	epresentation of the debtor(s) in		
	She	sheryl S Zust ryl S Zust 0934259 ature of Attorney ryl S Zust PA 9 Clyde Morris Blvd. e 610 Orange, FL 32129 o) 258 3900 e of law firm				